

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 02, 2000 8:00 am**  
**Secretary of State**

03-02-2000 90195 029 \*\*\*150.00

DOCUMENT # P97000015540 ✓

1. Entity Name  
**ELDON J. GARDNER ENTERPRISES, INC.**

Principal Place of Business      Mailing Address  
 5555 Taylor Road      5555 Taylor Road  
 Naples, Florida 34109      Naples, Florida 34109

2. Principal Place of Business      3. Mailing Address  
 Suite, Apt. #, etc.      Suite, Apt. #, etc.  
 City & State      City & State  
 Zip      Country      Zip      Country

4. FEI Number      Applied For  
**59-3438731**      Not Applicable  
 5. Certificate of Status Desired       **\$8.75 Additional Fee Required**



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent  
**Eldon J. Gardner**  
**5555 Taylor Road**  
**Naples, Florida 34109**

7. Name and Address of New Registered Agent  
 Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City      **FL**      Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent's signature required when re-stating) \_\_\_\_\_ DATE \_\_\_\_\_

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS	
TITLE D/P <input type="checkbox"/> Delete	NAME Eldon J. Gardner STREET ADDRESS 5555 Taylor Road CITY-ST-ZIP Naples, Florida 34109
TITLE	NAME
TITLE	NAME
TITLE	NAME
TITLE	NAME
TITLE	NAME

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE D/VP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	NAME James Case, Sr. STREET ADDRESS 749 103rd Ave N. CITY-ST-ZIP Naples, Florida 34108
TITLE D/VP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	NAME Phillip B. Sneed STREET ADDRESS 839 108th Ave N. CITY-ST-ZIP Naples, Florida 34108
TITLE	NAME
TITLE	NAME
TITLE	NAME
TITLE	NAME

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(a), Florida Statutes; further certify that the information included on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE: **Eldon J. Gardner** *Eldon J. Gardner* **January 18, 2000** 941-566-2706  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Custom Report #